

APPLICATION DATA SHEET

Application Information

Application Number::
Filing Date::
Application Type:: Regular
Subject Matter:: Utility
CD-ROM or CD-R?:: None
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?:: No
Computer Readable Form (CRF)?:: No
Number of Copies of CRF::
Title:: BIOCOMPATIBLE POLYMERIC DELIVERY SYSTEMS FOR
SUSTAINED RELEASE OF QUINAZOLINONES
Attorney Docket Number:: COL-002
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 16
Small Entity?:: Yes
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Shlomo
Middle Name::

Family Name:: Magdassi
Name Suffix::
City of Residence:: Jerusalem
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 36 Hanerd Street
City of Mailing Address:: Jerusalem
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 96626

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Daniel
Middle Name::
Family Name:: Cohn
Name Suffix::
City of Residence:: Jerusalem
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 1 Motskin Street
City of Mailing Address:: Jerusalem
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 96551

Correspondence Information

Correspondence Customer Number:: 44966

Representative Information

Representative Customer Number::

44966

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Claiming the benefit under 35 USC 119(e)		

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
PCT	PCT/IL2004/000189	02/25/04	Yes

Assignee Information

Assignee Name::

Street of Mailing Address:

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::